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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/854,039
Filing Date	May 11, 2001
First Named Inventor	Blasingame et al.
Group Art Unit	2166
Examiner Name	Alex Kalinowski
Attorney Docket Number	0720.P001A

Total Number of Pages in This Submission

3

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- ☐ Fee Transmittal Form
  - ☐ Fee Attached -----
- ☐ Amendment / Reply
  - ☐ After Final
  - ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/Incomplete Application
  - ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☒ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) \_\_\_\_\_

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please identify below):

**STATEMENT UNDER 37  
CFR 3.73b, AND A  
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Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm  
or  
Individual name

Law Offices of James D. McFarland

Signature

*James D. McFarland*

Date

February 06, 2002

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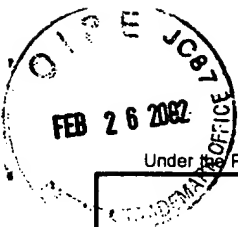
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Attorney File No. **0720.P001A**

**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant/Patent Owner: **Opision Medical, Inc.**

Application No./Patent No.: **09/854,039**

Filed/Issue Date: **5/11/2001**

Entitled: **Networked Medical Information System for Clinical Practices**

**Opision Medical, Inc., a California corporation**

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

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states that it is:

1. ☒ the assignee of the entire right, title, and interest; or  
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is \_\_\_\_\_%

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012061, Frame 0224, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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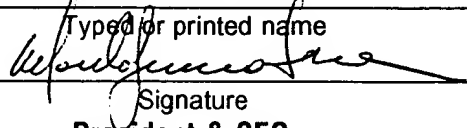
☐ Additional documents in the chain of title are listed on a supplemental sheet.

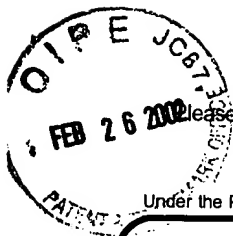
- ☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

1/31/02  
Date

Marcelo G. Lima  
Typed or printed name  
  
Signature  
President & CEO  
Title



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Application Number	09/854,039
Filing Date	May 11, 2001
First Named Inventor	Blasingame et al.
Title	Networked Medical Information System for Clinical Practices
Group Art Unit	2166
Examiner Name	Alex Kalinowski
Attorney Docket Number	0720.P001A

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name

Marcelo G. Lima, President Opsion Medical, Inc.

Signature

Date

1/31/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.